

going to see huge savings in tax dollars and even bigger savings, more than twice the savings, in private dollars that will free up hundreds of billions of dollars literally between now and the end of the decade to reinvest in economic growth and opportunity.

In the short run, our tough call will be how do you take the savings and phase in universal coverage. Or should there be some other way to pay for that? We've got some short-term calls to make. But there's no question that in the median term, 5 to 8 years, you're looking at massive savings with universal coverage in both tax dollars and private sector dollars if we do it right.

Q. Mr. President, do you intend to pay the First Lady for her efforts?

The President. No. No. I never have paid her for her public service efforts. I don't want to start now.

Q. Is 100 days hard and fast, or are you willing to be flexible on that if it's not quite ready?

The President. If it were 101 days I wouldn't have a heart attack, but I don't want to—I want it done now. I think we know what the major alternatives are. What we have to do now is something nobody's done, and that is to meld them into the best possible legislation, taking account of some of the problems that exist with every course.

And let me make one acknowledgment on the front end about this. Legitimate objections can be raised to any course of action in this area. That is, there is no such thing as a perfect solution. So whatever course we choose to take, somebody can say, "Well, it's not perfect for these reasons." To that, I have two answers, and I'm going to say this until I'm blue in the face for this entire year until we get action. Number one, the worst thing we can do is keep on doing what we're doing now, because more and more people are falling out of the system and the cost is becoming more and more burdensome to those who are still bearing it. So whatever course we take, we will preserve what is best about American health care, some consumer choice and the quality of care. So whatever problems we have, they won't be as bad as the ones we've got now. Number two, this is not going to be the end of the line. Whatever problems are there can be fixed later. But

we will never, never get anywhere if we stand paralyzed, because there's no such thing as a perfect alternative.

Q. What factors did you consider in giving this high-profile position to Mrs. Clinton?

The President. Of all the people I've ever worked with in my life, she's better at organizing and leading people from a complex beginning to a certain end than anybody I've ever worked with in my life. And that's what I want done here.

NOTE: The President spoke at 2:02 p.m. in the Roosevelt Room at the White House at a meeting of the Health Care Working Group.

Statement by the Director of Communications on the President's Meeting With the Joint Chiefs of Staff

January 25, 1993

The President and the Joint Chiefs of Staff had a cordial, honest, and respectful meeting. They covered a range of issues but focused primarily on gays in the military.

The President reiterated his commitment to ending discrimination against homosexuals in the military solely on the basis of status and to maintaining morale and cohesion in the military.

The Joint Chiefs of Staff expressed their concerns and difficulties with the President's commitment but also expressed their respect for his decisionmaking power as Commander in Chief.

Appointment of John D. Hart as Deputy Assistant to the President and Deputy Director of the Office of Intergovernmental Affairs

January 25, 1993

The President today appointed John D. Hart to the position of Deputy Assistant to